

<b>C MBINED</b>		Attorney Docket Number	701826-50990
<b>DECLARATION OF UTILITY OR DESIGN</b>		First Named Inventor	Alan H. Lazarus
<b>PATENT APPLICATION (37 CFR 1.63)</b>		<i>Complete if known</i>	
<b>AND POWER OF ATTORNEY</b>		Application Number	09/709,249
<input type="checkbox"/> Declaration Submitted with Initial Filing         OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)		Filing Date	November 10, 2000
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**A METHOD FOR PREVENTING AND INHIBITING HUMAN HLA ALLOIMMUNE RESPONSE TO PLATELET TRANSFUSION**

the specification of which

☐ is attached hereto.

OR

☒ was filed on November 10, 2000  
(mm/dd/yyyy)

as United States Application Number or PCT International Application Number \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable).  
(mm/dd/yyyy)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/164,777	November 12, 1999

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.



COMBINED DECLARATION FOR UTILITY OR DESIGN  
PATENT APPLICATION (37 CFR 1.63) AND POWER OF ATTORNEY

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Trademark Office connected therewith:

<input type="checkbox"/> Customer Number		<div>Place Customer Number Bar Code Label Here</div>	
OR <input checked="" type="checkbox"/> Registered practitioner(s) name/registration number listed below			
Name	Registration Number	Name	Registration Number
David S. Resnick	34,235	Ronald I. Eisenstein	30,628
Robert Mitchell	25,007	Guy Houle	24,971
Paul Marcoux	24,990	Kevin P. Murphy	26,674
Robert Carrier	30,726	Michel J. Sophia	37,017
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

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LAZARUS

Inventor's Signature

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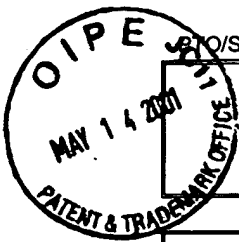
Country

Canada

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) PTO/SB/02A attached hereto.

COMBINED DECLARATION FOR UTILITY OR DESIGN  
PATENT APPLICATION (37 CFR 1.63) AND POWER OF ATTORNEY

SIPO/SB/02A (3-97)



**DECLARATION**

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Pag 3 f3

**Name of Additional Joint Inventor, if any:**

☐ A petition has been filed for this unsigned inventor

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FREEDMAN

Inventor's Signature

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